

Request for Carryforward Allocation

Issued under the authority of P.A. 496 Of 1988.

Name of Issuer		Date
Total Principal Amount of Issue \$	If Refund Issue, Amount in Excess of Obligation to be Refunded \$	Amount Requested for Carryforward \$

Carryforward Information - Fill in only one project per numbered box.

Project(s) for which Carryforward is Requested	Portion of Allocation to be Carried Forward	Year to which Allocation is to be Carried Forward
1.		
2.		
3.		
4.		
5.		
Name of Legal Counsel Issuing Tax Exempt Opinion:		Has any previous request been made by or on behalf of the issuer for the issue? <input type="checkbox"/> Yes <input type="checkbox"/> No

Note: You must attach a copy of an inducement resolution or other comparable preliminary approval.

Certification

I hereby certify that the above information is correct and that I have not made or received any bribe, gift, gratuity or direct or indirect contribution to any political campaign for consideration by the State Treasurer of the allocation request or of the issuer of a request to induce a project and seek allocation.		
I understand that a change in the facility to be financed, in the issuer, in the year for which the allocation is sought or in the matters certified by the issuer shall invalidate the request until an amended request is filed with the Department of Treasury and shall invalidate any allocation the extent of the change.		
Signature		Date
Print Name	Print Title	
Municipal Address		Telephone (Area Code and Number)